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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/770,994	01/25/2001	Trung M. Tran	5181-78600	7544
58467	7590	08/06/2008		
MHKKG/SUN P.O. BOX 398 AUSTIN, TX 78767			EXAMINER DALENCOURT, YVES	
			ART UNIT 2157	PAPER NUMBER
			MAIL DATE 08/06/2008	DELIVERY MODE PAPER

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

## Interview Summary

**Application No.**

09/770,994

**Applicant(s)**

TRAN, TRUNG M.

**Examiner**

Yves Dalencourt

**Art Unit**

2157

All participants (applicant, applicant's representative, PTO personnel):

(1) Yves Dalencourt.

(3) \_\_\_\_.

(2) Robert C. Kowert.

(4) \_\_\_\_.

Date of Interview: 30 October 2008.

Type: a) ☒ Telephonic b) ☐ Video Conference

c) ☐ Personal (copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.

If Yes, brief description: \_\_\_\_.

Claim(s) discussed: \_\_\_\_.

Identification of prior art discussed: \_\_\_\_.

Agreement with respect to the claims f) ☐ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Mr. Robert C. Kowert (Applicant's representative) confirmed the abandonment of this application during a telephone conversation on 10/30/2008.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

\_\_\_\_\_  
Examiner's signature, if required